# APPENDIX G

Philosophy/Values of System of Care: Principles of Service Delivery (Mental Health Plan 1996)

### ADULT SERVICE SYSTEM

### Philosophy/Values of System of Care

As outlined in Virginia's previous Mental Health Plans, DMHMRSAS has articulated a philosophy to guide mental health service development in Virginia. This philosophy has been developed and refined each year through the Planning Council process, and is summarized in the following four value statements:

- The system of services must be consumer and family-oriented, emphasizing choice involvement, and individualization for those needing services.
- The system of services must be community-centered, maximizing opportunities for recovery and integration into full community life, and providing services in the most natural, least restrictive environment.
- The system of services must be accessible, coordinated, and comprehensive; basic needs for housing, income supports, education, meaningful activity or employment, and social supports must be met in a manner compatible with the needs of diverse cultural and special need groups.
- The system of services must provide care and supports of the highest quality at the least cost to the taxpaying citizens of the Commonwealth.

### **Principles of Service Delivery**

Using the mission and values previously stated as a foundation for service system development, mental health services and supports for adults with serious mental illness can be best be provided through a community support system based on the following principles of service delivery:

- <u>Personal Dignity</u> Services are designed, implemented and delivered in ways which demonstrate respect for the dignity and value of the individual.
- <u>Self-determination</u> Consumer needs and preferences are the basis for program funding, design, and evaluation.
- <u>Indefinite duration</u> Services are available whenever, and for as long as, needed.

- <u>Individualization</u> Services are individualized and adapted to the unique and changing needs and preferences of each consumer.
- <u>Normalization</u> Services are provided in normal environments whenever possible, maximizing opportunities for recovery and full participation in the community.
- <u>Least Restrictive Approach</u> Services are provided in the least restrictive manner and incorporate natural supports whenever available.
- <u>Comprehensiveness</u> The service system provides equitable access for all Virginians to a
  comprehensive array of services, including housing and supportive services such as
  employment related services, as well as advocacy and assistance with income support
  needs.
- <u>Coordination</u> Services maximize intra- and inter-agency relationships and resources to ensure an integrated, coordinated system of care. Consumers have access to extensive case management services which ensure service coordination and continuity and help "wrap services around" consumers who need them.
- Availability and Accessibility Effective services are organized around people, not places, and outreach is used to help connect people with services.
- <u>Non-discrimination</u> Services are responsive to the diverse characteristics of the wide range of people who have serious mental illness, respecting racial and cultural diversity and special needs.
- <u>Protection and Advocacy</u> Prompt, responsive protection and advocacy services safeguard the rights of consumers and families while respecting the public safety concerns of citizens and communities in Virginia.
- <u>Consumer and Family Involvement</u> Planning involves consumers and families at all levels, ranging from system, policy and evaluation issues to individual service planning and delivery.
- Accountability for Outcomes The service system is accountable to the consumers and taxpayers of Virginia. Services are carefully monitored and evaluated to ensure positive consumer outcomes, quality of care, relevance to priorities, and efficiency in the use of resources.
- <u>Quality of Care</u> Service planning and development is based on thorough needs assessment, systematic evaluation, and current research. The commitment to quality includes a focus on human resource development because well-trained professionals familiar with state-of-the-art service delivery approaches are essential.

#### CHILD AND ADOLESCENT SERVICE SYSTEM

## Philosophy/Values

The system of care for children and adolescents with or at risk of developing serious emotional disturbances and their families should represent a philosophy about the way in which services are delivered for children, adolescents, and their families. The system of care should be guided by basic core values and guiding principles. It is critical that these values be clearly articulated so that they may be used to guide the character and quality of the system of care.

First, basic core values of the system of care must be that the system is <u>child-centered and family-focused</u>, with the needs of the child and family dictating the types and mix of services provided. This represents a commitment to adapt services to the child and family, rather than expecting children and families to conform to pre-existing service configurations. It also represents a commitment to providing services in an environment and in a manner that enhances the personal dignity of children and families, respects their wishes and individual goals, and maximizes opportunities for involvement and self-determination in the planning and delivery of services.

Another basic core value of the system of care must be that the system is community-based, allowing for the least restrictive and most normal environment possible. While institutional care may be indicated for certain children at various points in time, in most cases appropriate services can be provided in other, less- restrictive settings within the home community.

In order to develop a child-centered, family-focused, and community-based system of care, funding must be sufficient to provide quality services to address the multiple and changing needs of this population. A solid financial base needs to be established within the Commonwealth so that energies may be placed in the areas of program development and service delivery.

### **Principles**

In addition to the basic core values for the system of care, ten principles have been identified which need to govern the operation of the system of care for children, adolescents, and their families. They are as follows:

Children and adolescents with or at risk of developing serious emotional disturbances and their families should have access to a <u>comprehensive array of services</u> that addresses the child's physical, emotional, social, and educational needs.

- 2. Children and adolescents with or at risk of developing serious emotional disturbances and their families should receive individualized services in accordance with the unique strengths and needs of each child and family and in accordance with an <u>individualized</u> service plan.
- Children and adolescents with or at risk of developing serious emotional disturbances and their families should receive services within the <u>least restrictive and most normal</u> environment that is clinically appropriate.
- 4. The <u>families and surrogate families</u> of children and adolescents with or at risk of developing serious emotional disturbances should be full partners in all aspects of the planning and delivery of services.
- Children and adolescents with or at risk of developing serious emotional disturbances and their families should receive services that are <u>integrated</u> with both financial and programmatic linkages between child-serving agencies including mechanisms for planning, developing and coordinating services.
- 6. Children and adolescents with or at risk of developing serious emotional disturbances and their families should be provided with <u>case management</u> to ensure that multiple services are delivered in a coordinated and therapeutic manner and to ensure that they can move through the system of services in accordance with their changing strengths and needs.
- 7. Early identification and intervention for children at risk of developing serious emotional disturbances and their families should be promoted by the system of care in order to enhance the likelihood of positive outcomes.
- 8. Adolescents with serious emotional disturbances and their families should be ensured smooth transitions to the adult service system as the adolescents reach maturity.
- 9. The <u>rights</u> of children and adolescents with or at risk of developing serious emotional disturbances and their families should be protected, and effective <u>advocacy efforts</u> for this population should be promoted.
- 10. Children and adolescents with or at risk of developing serious emotional disturbances and their families should receive services without regard to race, religion, national origin, sex, physical disability, sexual orientation, and other characteristics and preferences; and these services should be sensitive and responsive to cultural differences and special needs.